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CONFIRMATION NO. 6449

SERIAL NUMBER 10/601,279	FILING OR 371(c) DATE 06/20/2003 RULE	CLASS 514	GROUP ART UNIT 1617	ATTORNEY DOCKET NO. AVZ-005CCPA2CN
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**APPLICANTS**

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**\*\* CONTINUING DATA \*\*\*\*\***

This application is a CON of 08/958,374 10/27/1997 ABN which is a CON of 08/736,967 10/25/1996 PAT 5,998,457  
 which claims benefit of 60/005,882 10/26/1995

**\*\* FOREIGN APPLICATIONS \*\*\*\*\***

**IF REQUIRED, FOREIGN FILING LICENSE GRANTED\*\* SMALL ENTITY \*\***  
**\*\* 08/28/2003**

Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no	STATE OR COUNTRY MA	SHEETS DRAWING 0	TOTAL CLAIMS 13	INDEPENDENT CLAIMS 8
35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance	Examiner's Signature	Initials		

**ADDRESS**

00959

**TITLE**

Use of creatine analogues and creatine kinase modulators for the prevention and treatment of obesity and its related disorders

FILING FEE RECEIVED 665	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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